

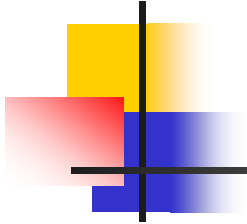


California Department of Mental Health

California Strategic Plan on Suicide Prevention

Presentation to the Mental Health Services
Oversight and Accountability Commission
September 27, 2007

**Beverly Whitcomb, Mental Health Program Supervisor
Prevention and Early Intervention Branch**



Background and Directive

- Senate Bill 1356, Lowenthal (2006)
 - Department of Mental Health to adopt and distribute a statewide strategic suicide prevention plan
- Governor's Directive (September 2006)
 - Vetoed SB 1356 and directs the Health & Human Services Agency and the Department of Mental Health to administratively develop a statewide strategic plan on suicide prevention
 - Due to the Governor May 1, 2008



Suicide Prevention Plan Advisory Committee

■ Suicide Prevention Plan Advisory Committee Membership

- Consumers of mental health services
- Family members of consumers
- County mental health and health department representatives
- Law enforcement
- Mental health and health providers
- Researchers
- Advocates
- State agencies
- Others with expertise and/or experience in suicide prevention



Suicide Prevention Plan Advisory Committee

■ Responsibilities

- Deliberate the broad issues to be considered in establishing priorities for statewide suicide prevention efforts
- Identify suicide prevention needs and resources at the state and local levels
- Develop a knowledge base that will inform recommendations for suicide prevention



Suicide Prevention Plan Advisory Committee

- Responsibilities, continued...
 - Act as ambassadors between local communities and the statewide planning process to facilitate information sharing and participation in the development of the plan
 - **Recommend policy and program priorities for the California Strategic Plan for Suicide Prevention**

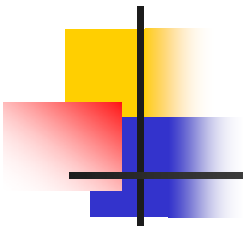


Source Materials Reviewed

- US Surgeon General's Call to Action (1999)
- National Strategy for Suicide Prevention (2001)
- California Strategy for Suicide Prevention (SPAN-CA)
- MHSA Prevention and Early Intervention Stakeholder Meetings, April 2007
- Preliminary suggestions from committee applications
- Data summaries from the California Department of Public Health, EPIC Branch
- Information provided by Committee members through an electronic survey
- Committee Data Work Group findings



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Preliminary Recommendations

- Five Key Strategic Directions
- Recommended Actions for Each Strategic Direction
- Example Methods, Tools, Resources



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Strategic Direction 1:

- Raise awareness that suicide is preventable and create a supportive environment for suicide prevention



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Strategic Direction 2:

- Increase leadership, collaboration and coordination among public agencies, private organizations and communities to improve services and build coalitions to prevent suicide.



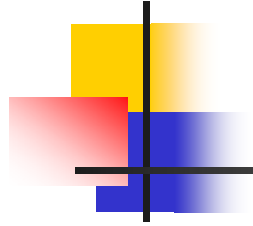
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Strategic Direction 3:

- Develop and implement service guidelines and provide training for consistent and effective early identification, referral, access, intervention, and follow up care.



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Strategic Direction 4:

- Expand suicide prevention programs in communities and front line systems to increase points of access for effective suicide prevention, risk assessment, treatment and aftercare.



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Strategic Direction 5:

- Improve data collection, research and information-sharing with the public to advance suicide prevention efforts and measure progress.



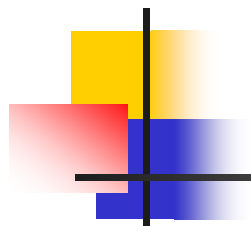
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Next Steps

1. Deadline for public input is September 30, 2007
2. Committee recommendations to DMH will be finalized at the November 29, 2007 meeting
3. After November's meetings, DMH will analyze and complete content
4. Final draft will be presented to OAC at January 2008 meeting
5. Submit to the Governor by May 1, 2008



California Strategic Plan on Suicide Prevention



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